DAY TREATMENT AND TRAINING, ADULT

Service Description H053-KJ

A service that provides specialized sensory-motor, cognitive, communicative, social interaction and behavioral training to promote skill development for some portion of a 24-hour day.

Service Requirements and Limitations

- 1. This service shall not be provided in a group home or a developmental home (child or adult).
- 2. This service shall not be provided when the <u>Division memberconsumer</u> is hospitalized.
- 3. This service shall not be provided to <u>members consumers</u> living in <u>skilled nursing facilities</u>, non-state operated <u>Intermediate Care FacilitieFacilities</u> (<u>"ICFs"</u>)/<u>MR</u>, or Level I or Level II behavioral health facilities.
- 4. This Day program services shall beare provided in a Qualified Vendor owned or leased setting, where the majority of the individuals have disabilities and are supervised by paid Qualified Vendor staff. The setting must be inspected/approved by the Department's Office of Licensing, Certification, and Regulation ("OLCR") and approved by the Division.
- 5. The primary use of the setting shall be for the operation of a day program, not as a permanent residence, e. Exceptions to this requirement must be unless approved by the Division's District Program Manager or /designee.
- 6. This service is considered to be habilitation.
- 7. This service provides for the personal care needs of the member.
- 8. Therapy services (Occupational, Physical, and/or Speech) may be provided at Day Treatment and Training locations as identified on the member's planning document [e.g., Individual Support Plan ("ISP")] under the following circumstances:
 - 8.1 With the Day Treatment and Training staff present and learning how to implement activities to meet the member's outcome(s) and in conjunction with the home program, or
 - 8.2 At the request of the member or member's representative and with the agreement of the Day Treatment and Training program. A caregiver/responsible personmember representative, other than Day Treatment and Training staff, must be present and participating. In this circumstance, the Day Treatment and Training program shall not bill for the time during which the therapy is occurring.
- 9. This service shall not be provided in the same room at the same time -as a Center-Based Employment service.

10. Day Treatment activities shall not include activities that would entitle the member to wages or other work-related compensation.

Service Goals and Objectives

Service Goals

- To provide training and supervision for the <u>memberconsumer</u> to increase or maintain his/her socialization and adaptive skills to <u>livereside</u> and participate <u>successfully</u>-in <u>thehis/her own</u> community.
- 2. To develop positive relationships and support for consumers and their families.
- 32. To provide opportunities for consumers to interact socially with family, friends, and others in the community at large, including providing information regarding and facilitating access to community resources.
- 4. To assist the consumer in developing skills to achieve and maintain a quality of life that promotes the consumer's vision of the future.
- 53. To provide opportunities for memberseonsumers to develop skills that lead to meaningful days, valued community roles, and promotes the member's vision of the future and prioritiesparticipate in meaningful age appropriate activities and experience new activities.

Service Objectives

The Qualified Vendor shall ensure the following objectives are met:

- 1. In accordance with the <u>memberconsumer</u>'s <u>planning document [e.g., Individual Support Plan</u> (ISP)] processes, assist in developing an individualized support plan, including:
 - 1.1 Establishing iIndividualized, time-limited training functional outcomes that are based on assessment data and input from the membereonsumer and the membereonsumer's representative that will allow the member's consumer to achieve his/her long term vision for the future and priorities.
 - 1.2 Developing A specific teaching strategyies for each habilitative functional outcomes within twenty (1020) business days after initiating initiation of the service for a new or a continuing placement and whenever a new outcome has been identified for the member. The specific teaching training strategy for each functional outcome shall identify the schedule for implementation, frequency of services, data collection methods, and the steps to be followed to teach the new skill teaching strategies.
 - 1.3 Based upon the presence or absence of measurable progress, make Cehanges to specific training functional outcome(s) and/or strategies, as agreed upon by the member's

planning team ISP team, based upon the presence or absence of measurable progress by the member.

- 2. As identified in the <u>memberconsumer</u>'s <u>planning document ISP</u>, provide training and/or assistance such as:
 - 2.1 Assistance and training related to personal and physical needs and routine daily living skills;
 - 2.2 Implementing strategies to address behavioral concerns, developing behavior intervention programs, and coordinating with behavioral health programs to ensure proper review of medication treatment plans;
 - 2.3 Ensuring that the health needs of the <u>memberconsumer</u> are being met, including providing follow up as requested by the <u>memberconsumer</u>'s Primary Care Provider ("PCP") or medical specialist;
 - 2.4 Implementing all therapeutic recommendations including speech, occupational, and physical therapy, and assisting <u>membersconsumers</u> in following special diets, exercise routines, or other therapeutic <u>programsregimes</u>;
 - 2.5 Mobility training, alternative, or adaptive communication training;
 - 2.6 Providing general supervision to the memberconsumer;
 - 2.7 Opportunities for training and/or practice in basic <u>lifeconsumer</u> skills such as shopping, banking, money management, access and use of community resources, and community survival skills; and
 - 2.8 Assisting <u>memberseonsumers</u> in utilizing community transportation resources to support the <u>memberconsumer</u> in all daily living activities (,-e.g., day treatment and training, employment situation, medical appointments, visits with family and friends and other community activities, etc.,) as identified within the <u>memberconsumer</u>'s planning document ISP.
- 3. Develop, maintain, or enhance independent functioning skills in sensory-motor areas, cognition, personal grooming, hygiene, dressing, eating, toileting, self-medication and first aid, recognizing symptoms of illness, and preventing accidents and illnesses.
- 4. Assist each <u>memberconsumer</u> in developing methods of starting and maintaining friendships of his/her choice, as well as appropriate assertiveness, social skills, and problem solving abilities for use in daily interactions.
- 5. Provide opportunities for <u>members</u> to participate in community activities and facilitate <u>memberconsumer</u> utilization of community resources.

- 6. Provide transportation necessary to support program activities.
- 7. Develop, at a minimum, a monthly on-site/community integrated schedule of daily activities and document member'sconsumers direct input into the schedule. Daily activities and schedules are based on memberconsumer choice, developmental level, planning document ISP goals, and enrichment of life experiences. Allow for reasonable choice in activity participation and offer alternative activities. This schedule shall be available to memberconsumer representatives, or others upon request.
- 8. Play an active role in ensuring that services with other involved entities, including group homes, health care providers, and schools, are coordinated to meet the needs of the memberseonsumers served.
- 9. When appropriate, include opportunities for consumers to experience work related activities as part of habilitative learning functional outcomes. NEED TO DECIDE WHETHER MEMBERS MAY RECEIVE PAYMENT WHEN COMPLETING DTA "WORK" ACTIVITIES!! THE MEMBER IS AN EMPLOYEE IF PAYMENT IS OCCURRING THEN SHOULD NOT BE IN A DTA BUT AN EMPLOYMENT PROGRAM?

 Members Consumers who desire and/or demonstrate the work-related skills shall should be referred to their planning ISP team to consider adding an employment service for considering the addition of an employment outcome to their planning document ISP.
- 10. Partner with the Division to conduct program reviews to assess performance in meeting all identified tasks, promote quality improvement, and encourage best practices. Such reviews shall include participation of memberseonsumers served, families, and all other interested parties. The frequency of the reviews shall be determined by the Division.

Service Utilization Information

1. Typical utilization by memberconsumer varies. The maximum limit of participation is eight (8) seven (7) units per day; direct service time associated with providing transportation to/from the program is included in the "Flat Trip Rate for Regularly Scheduled Daily Transportation" rate. Typical programs operate during the weekdays, Monday through Friday, and program sites are generally open during typical work day hours, except for holidays.

The Qualified Vendor shall provide transportation to and from the program for any member needing transportation when the member does not live in a licensed residential setting.

- 2. A number of <u>memberseonsumers</u> do not want or demand a full-time option. It is the responsibility of the <u>planning ISP</u> team and the Qualified Vendor to determine the <u>memberconsumer</u>'s anticipated attendance, and their schedule as part of the initial service planning and referral.
- 3. This service has typically been provided at the 1:2.5 to 1:4.5 staff_-to_membereonsumer ratio. Higher ratios may be used based on the collective needs of the members and must be approved by the District Program Manager/designeeconsumers. Lower ratios must be

- specifically authorized on a case-by-case basis by the District's Program Manager/designee based on the needs of the memberseonsumers.
- 4. Children through the age of fifteen (15) shall be provided service separately from adults. through the age of fifteen (15 (fifteen). Upon age sixteen (16 (sixteen), transition plans may be individually developed, and may permit the inclusion into an adult employment and/or day program with adults with parental/guardian consent. The transition plan and consent shall be available to the Division upon request.

Rate Basis

- 1. Published. The published ratio rate is based on the ratio of total direct service staff hours with membersconsumers present at the program to total membersconsumer hours.
- 2. The Division established a separate rate for this service in the rural areas of the state. This modified rate has a premium over the standard rate for this service. The Qualified Vendor shall bill the Division this modified rate only after it receives authorization from the DDD District Program Administrator / Manager or designee.
- 3. The Division established a separate rate for this service to behaviorally or medically intense memberseonsumers. Special authorization for these memberseonsumers is required by the District DD Program Administrator / Manager/or designee. The hours for these members consumers and the direct service staff hours related to the behaviorally or medically intense memberseonsumers shall not be considered in determining the overall program staffing ratio for the remaining memberseonsumers.
- 4. Throughout the term of the contract, the appropriate billing codes, billing units, and associated billing rules are subject to change. All billing codes and billing units, and associated billing rules will be included in the Division's Policies and Procedures Manual, Billing Manual, *RateBook*, and/or other provider resources made available by the Division.

Direct Service Staff Qualifications

The direct service staff shall have at least three (3) months experience in conducting group or individual activities related to specific developmental, habilitative, or recreational programs, or be supervised by an individual with such experience.

Recordkeeping and Reporting Requirements

- 1. The Qualified Vendor shall maintain a copy of each <u>membereonsumer</u>'s <u>planning</u> <u>documentISP</u> on file and make it available to the <u>membereonsumer</u>/family/ <u>membereonsumer</u>'s representative and/or Division upon request.
- 2. The Qualified Vendor shall submit the teaching strategies that were developed for the member's habilitative outcomes to the member's Support Coordinator for planning team review no later than twentyten (420) business days following the initiation of service for a

new or a continuing placement and whenever a new outcome has been identified for the member.

- 32. The Qualified Vendor shall submit quarterly individualized progress reports, including a written summary describing the specific service activities and the performance data that identifies the consumer's progress toward achievement of the established functional outcomes on the member within thirty (30) days after the close of the quarter to the member's consumer's Support Coordinator Division and the member consumer/family/member's consumer's representative unless the member/member's representative has requested not to receive them, if requested. The quarter is based on the member's annual planning eyelecalendar year and the reports are due no later than the fifteenth (15) day following the end of the quarter. The Qualified Vendor shall refer to the Division's Provider Manual for guidance on report due dates and minimum content of the reports. The first quarterly progress report is due no later than the fifteenth (15th) day following the end of the quarter in which the service is initiated. Subsequent quarterly progress reports are due no later than the fifteenth (15th) day following the end of the quarter.
 - 3.1 At a minimum, the report shall include a written summary describing specificservice activities, overall progress specific to planning document outcomes, performance data that identifies the member's progress toward achievement of the established outcomes, and current and potential barriers to achieving outcomes.
- 34. The Qualified Vendor shallmust keep a record of each member eonsumer's attendance, including time of arrival and departure. The time begins when the Qualified Vendor assumes responsibility for the member eonsumer and arrival to the site destination, and ends when the Qualified Vendor ends this responsibility. Total time shall not include any time spent during transportation to/from the member's residence.
- 54. For direct service staff, Tthe Qualified Vendor shallmust maintainkeep daily records as proof of the number of hours worked by eachits direct service staff providing direct services to membersconsumers in the program.
 - <u>5.1</u> Only the time when <u>members</u> are present at the program shall be counted as direct service.
 - 5.2 Each time sheet, equivalent document, or data system- must contain the original signature or other independent verification (such as an attendance log that has been signed by the member's representative or the direct care staff who documents the member's arrival and departure) after service delivery confirming the hours worked. Proof of hours worked must be signed or verified by the member/member's representative/agency representative before the Qualified Vendor submits the claim for payment.
 - 5.3 Staff tTime related tofor behaviorally or medically intense members with who have specially authorized staffing ratios shall be recorded separately.

- <u>65</u>. The Qualified Vendor shall have a monthly schedule of planned activities posted at all times.
- <u>76</u>. Best <u>p</u>Practices will require advance notice of the activity schedule to <u>consumer</u>participants.
- <u>87</u>. The Qualified Vendor shall maintain data that demonstrates full compliance with all programmatic and contractual requirements of the Department and the Division.
- 9. The Qualified Vendor shall maintain a ledger and documentation (e.g., receipts) that accounts for the expenditure of all for all member (client) funds paid or provided to the vendor-used.

